

# Redefining what's possible.

## Medicare Supplement Insurance

## Accendo Insurance Company

part of the CVS Health® family of companies  
and Aetna affiliate

Florida



# Helping people on their path to better health.

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Every one of us at CVS Health shares a single, clear purpose: helping people on their path to better health.

Whether in our pharmacies or through our health services and insurance plans, we are pioneering a bold new approach to total health. Making quality health care more affordable, accessible, simple and seamless. Creating innovations that not only help people get well, but help them stay well in body, mind and spirit.

By unlocking the power of data and opening our hearts to the needs of each person, we're creating unmatched human connections to transform the health care experience: welcoming moments of 1-on-1 care, millions of times each day.

We bring expertise and care to communities around the corner and across the country, deliver essential products and prescriptions right to people's doorsteps, provide vital services in their homes, and put a wealth of resources at their fingertips.

Working together across our disciplines, we surround those we serve with personal support that matches their unique circumstances.

This is health with heart: our promise that no matter where someone is on their path to better health, we'll be with them all the way.

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This is a brochure for individual Medicare Supplement insurance policy forms ACCMSP19A FL, ACCMSP19F FL, ACCMSP19G FL, ACCMSP19N FL, and is not a contract of insurance. For complete details of all benefits, please read your Outline of Coverage carefully and refer to the "Guide to Health Insurance for People with Medicare".

# The value of peace of mind.

A Medicare Supplement insurance policy helps you manage and budget your health care expenses.

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## Filling the gaps

Medicare provides beneficial coverage for health related expenses, but it does not cover all health care expenses. There are a number of gaps in Medicare coverage that you either pay for out-of-pocket or with private insurance. A Medicare Supplement insurance policy is a health insurance policy (also called Medigap) sold by a private insurance company to help fill in some of those gaps.

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## Know your options

Although private insurance companies provide Medicare Supplement coverage, Medicare Supplement insurance plans are strictly regulated by both federal and state government. Make an informed decision about what is right for you. Before you purchase a plan, make sure you understand what your Medicare coverage includes. Then choose a Medicare Supplement plan that best fits your needs.

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## Take care of yourself

A Medicare Supplement insurance policy helps you manage and budget your health care expenses with predictability and stability. A Medicare Supplement insurance policy helps pay some of the out-of-pocket costs for Medicare-approved services and works hand-in-hand with Medicare to provide more insurance coverage.

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## Feel good about your choices

A Medicare Supplement insurance policy has no restrictive networks, you can visit the physicians of your choice, and you have freedom when choosing a health care provider, including specialists and specialty hospitals that accepts Medicare patients. With automatic claims filing by most providers, you have less things to worry about.

# Choose from these plans.

Accendo Insurance Company offers Medicare Supplement Plans A, F, G, and N with varying amounts of coverage – Plan A providing basic benefits and Plan F offering more comprehensive coverage.

Premiums also vary according to the amount of coverage provided by a specific plan. A household premium discount is available for eligible applicants. (Reference the application for details.) Here are the benefits that are included with each plan.

Benefits	Plan A	Plan F*	Plan G	Plan N
<b>Basic benefits</b> (including hospice care)	●	●	●	●
<b>Part B coinsurance</b>	●	●	●	●**
<b>Part A deductible</b>		●	●	●
<b>Skilled nursing facility coinsurance</b>		●	●	●
<b>Foreign travel emergency</b>		●	●	●
<b>Part B excess charges</b>		●	●	
<b>Part B deductible</b>		●		

All plans are available to those eligible applicants under age 65 by reason of disability or end-stage renal disease.

\*\*Plan N requires \$20 copayment for office visits; \$50 copayment for emergency room visits. Copayments do not count toward the annual Part B deductible.

\*Plan F available for people first eligible for Medicare before 2020 only. This plan is not available for Medicare beneficiaries who are newly eligible in 2020.

## Covering your needs

Use this checklist as a starting point to help determine what you want your Medicare Supplement insurance policy to cover.

- Basic benefits** (including hospice care)
- Medicare Part B coinsurance**
- Medicare Part A deductible**
- Medicare Part B excess charges**
- Medicare Part B deductible** (not available for Medicare beneficiaries who are newly eligible in 2020)
- Skilled nursing facility coinsurance**
- Foreign travel emergency**

# What's great about the plans.

The following are features of Medicare Supplement plans.



## **30 days free look**

Return any policy for any reason within 30 days after receipt for a full refund of all premiums paid.

## **12-month rate guarantee**

No rate increase for the first 12 months, as long as the premiums are paid on time.

## **Guaranteed renewable**

No worries of reduced benefits or canceled coverage for the life of the policy, as long as the premiums are paid on time.

## **Freedom to choose your doctors**

You control and choose the physicians who you trust for your care, that accept Medicare patients.

## **Go direct to your doctors**

You can go directly to the physicians and specialists you choose, that accept Medicare patients, without pre-certifications and pre-approvals.

## **Benefits stay the same**

You always know what your benefits are with this standardized plan...no surprises or re-evaluations year-after-year.

## **Portable coverage**

You are not restricted to use a network of health care providers. If you move within the USA, your coverage goes with you.



## Common terms and definitions

### **Benefit period**

Starts the day you go to a hospital or skilled nursing facility; and ends when you have not received hospital or skilled nursing facility care for 60 consecutive days.

### **Coinsurance**

A percentage of Medicare-approved expenses not paid by Medicare.

### **Copayment**

A fixed fee amount that subscribers to a medical plan must pay when using specific services covered by an insurance plan.

### **Deductible**

Amount that one must pay for Medicare-approved expenses before Medicare begins to pay.

### **Eligible expenses**

Costs that are deemed medically necessary by Medicare and covered expenses under your plan.

### **Emergency care**

Immediate medical care needed because of an injury or an illness of sudden and unexpected onset.

### **Excess charges**

The difference between what a health care provider is permitted to charge and the Medicare-approved amount.

### **Hospice care**

A program of care and support for someone who is terminally ill; helps them live out the time they have remaining to the fullest extent possible.

### **Medicare-approved amount**

In original Medicare, the amount that a physician who accepts assignment can be paid, including what Medicare pays and any other deductibles, coinsurance, or copayments.

### **Premium**

The periodic payment to Medicare, an insurance company, or a health care plan for coverage.

## **Exclusions**

We will not pay for:

1. Loss incurred while your policy is not in force, except as provided in the Extension of Benefits section of your policy;
2. Hospital or Skilled Nursing Facility confinement incurred during a Medicare Part A Benefit Period that begins while this policy is not in force;
3. That portion of any Loss incurred which is paid for by Medicare;
4. Services for non-Medicare Eligible Expenses, including routine exams, take-home drugs and eye refractions;
5. Services for which a charge is not normally made in the absence of insurance;
6. Loss that is payable under any other Medicare supplement insurance policy or certificate; or
7. Loss that is payable under any other insurance which paid benefits for the same Loss on an expense incurred basis.

Underwritten by

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**Policy administered by Aetna Life Insurance Company and its affiliates**

Not connected with or endorsed by the U.S. Government or the Federal Medicare Program. This is a solicitation of insurance. Contact may be made by an insurance agent or company upon inquiry.